

Annexure I

On Rs. 300 stamp paper

INDEMNITY BOND

To,
The Trustees
Customer Service
ICICI Prudential Asset Management Company Ltd.
Nirlon Knowledge Park, 2nd Floor, Block B-2,
Western Express Highway, Goregaon, Mumbai - 63

Dear Sirs,			
Re: Change of name - Folio Nos			
Whereas, I,	, s/d/o	aged	years
residing at			
(hereinafter called a	as 'the said Scheme(s)'), of ICIC	I Prudential Mutual Fund.	
Whereas, I/my broker have/has erroneously	v written my name in the app	olication form no	dated
, as, instead of _	and the ap	oplication form is under my	signature
Whereas the units under the said scheme(s			e name o
NOW in consideration of ICICI Prudential Asset	Management Co. Ltd. (the AMC	C) allotting units in my correc	ct name i.e
under the			
UNDERTAKE AND DECLARE ON BEHALF OF M			
I shall at all times hereafter save, defend and keep Fund and its employees, Directors, Officers againcurred by them as a result of claims, legal costs regulatory or administrative authority and for an in connection with the AMC having allotted the in the above referred folios. Such costs may conconditionally and irrevocably and without red	ninst any losses, damages, costs s, fines, penalties raised by any in y other incident of a financial nation units in the name ofexceed the value of the transactions to any further litigation if	or expenses which may be nivestor(s)/ claimant/third part ure which they may be require under the said ction itself which I agree to a claim is made by the AMC	suffered of ty or by any red to mee Scheme(s indemnify
I agree that it is only upon the above assertion changing the name on good faith and is subnecessary, and confirms that the above facts regulatory authority (ies).	pject to approval by the Truste	es of ICICI Prudential Mutu	ıal Fund, i

I confirm that neither will I be violating any laws/rules/regulations by seeking such a name change nor do I intend to evade any taxes/cesses or any other statutory dues/charges.

I shall hold the AMC/ Trustees of ICICI Prudential Mutual Fund and its employees harmless and fully indemnified against claims and damages which may be made in respect hereof by any person (s)/third party claiming to be the beneficial holder of the said Investment or in any way interested therein.

And, I, undertake that, this Indemnity shall be enforceable against me and my respective Successors and Assigns and the benefits of this Indemnity shall inure for the benefit of the AMC, its successors and assigns and shall be irrevocable until discharge by them of all obligations devolving upon hereunder.

This indemnity and all rights and liabilities attached to this indemnity in case of dispute shall be enforceable at Mumbai and the dispute, if any, shall be triable by competent court having its jurisdiction in and over Mumbai.

N WITNESS WHEREOF I,			execute these
oresents on the			
Signed and delivered by the	following:		
Name:			
Signature:			
n presence of:			
VERIFICATION			
solemnly verify and confirm pelief and nothing material h		ated above are true and correct to	o the best of my knowledge and
Date:	_	Place:	
Signature of Deponer	nt(s)		
Indemnity Formats			
Name change			
Signature and Seal of No	tary		
Before me		Publi	ic / Magistrate